

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>10203</i>	<i>2-2-80</i>
O.I.P.E. CLASSIFIER	<i>KSD</i>		<i>2/26/80</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>71480</i>	<i>6-11-80</i>
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>11</i>	<i>7-5-80</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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